							Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999								29	c^{c}	188	87	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FO	R	NUMBE	NUMBER FILED NUMBER E		EXTRA	RATE		FEE	1	RATE	FEE	
ВА	SIC FEE						345.0		OR		690.00	
ТО	TAL CLAIMS	12	minus 20= *			X\$	X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS 4	— minus 3 =			X39=			OR	X78=	NC.	
MULTIPLE DEPENDENT CLAIM PRESENT						+130=			1	+260=	//2	
* If the difference in column 1 is less than zero, enter "0" in column					olumn 2	TOTAL			OR OR	TOTAL	0/20/	
CLAIMS AS AMENDED - PART II							IAL	Ļ	JOH	OTHER	THAN	
(Column 1) (Column 2) (Column 3)						SM	ALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.12	Minus	2	=	X\$	9≐		OR	X\$18=		
	Independent	. 4	Minus	****	=	ХЗ	9=		OR	X78=		
H	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT CLAIM		+13			OR	+260=		
					•		OTAL		┫	TOTAL	1	
	(Column 1) (Column 2) (Column 3)						FEE		OR	ADDIT. FEE	1/1-	
Ħ	STATE VISC	CLAIMS	7.00 A 5.45 A	HIGHEST				ADDI-	1		ADDI-	
MENDMENT B	Start Sale	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL FEE	
	Total	.12	Minus	20	= -	X\$	9=		OR	X\$18=		
AME	Independent	· 4	Minus	*** 4	= -	ХЗ	9=		OR	X78=		
H	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+13	:O=	-	OR	+260=		
İ						L	OTAL			TOTAL		
İ		(0.1	ADDIT	. FEE		OR	ADDIT. FEE	L				
_	SANT TO SERVE	(Column 1) CLAIMS	- Signat	(Column 2) HIGHEST	(Column 3)			ADDI	1		, ABBI	
AMENDMENT C		REMAINING AFTER AMENDMEN'T		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N	Total	*	Minus	**	= .	X\$	9=		OR	X\$18=		
ME	Independent	*	Minus	***	=	Х3	9=		OR	X78=		
Ĥ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										+260=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE												
				r Independent) is the		found in t	he ap	propriate bo	x in co	lumn 1.		